ILLINOIS JOB LINK ENROLLMENT FORM



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Instructions

Please fill in all required fields and answer all questions as they pertain to you. Allow staff 10 (ten) days for data entry of information.

CONTACT INFORMATION		
First Name Initial: Last Name:		
E-mail Address:		
Birthdate: Social Security Number:		
Street Address:	ZIP Code:	
County Country U.S.A. Other		
Home Phone: Ext: Alternative Phone:	Ext:	
BACKGROUND INFORMATION	2.00	
1. Can you legally work in the U.S.?		☐ Yes ☐ No
2. Are you a male age 18 and over?		☐ Yes ☐ No ☐ Yes ☐ No
3. If yes, are you registered for Selective Serivce?		Yes No
4. Have you ever plead guilty to or been convicted of any criminal offense other than a minor traff	fic violation?	Yes No
VETERAN INFORMATION		
1. Have you served in the U.S. military on active duty for 180 days or more other than training?		□Yes □ No
2. Were you released from active duty because of a disability prior to serving 180 days?		☐ Yes ☐ No ☐ Yes ☐ No
3. Have you served less than 180 days on active duty, but were in the Armed Forces? If you answered YES to any of the previous three questions, answered YES to any of the previous three questions.		□ res □ No
questions. If your answer was NO, please continue to qu		
4. Branch of service? US Army US Air Force US Coast Guard US Marine	s US Navy	
5. Enter your active duty service date	-	
6. Enter your active duty service end date /projected active duty service end date/ projected retiren	nent date	
7. What was your character of discharge?		
8. Will you be separating from active duty within the next 12 months?9. Will you be separating from active duty within the next 24 months?		☐ Yes☐ No☐ Yes☐ No
10. Are you currently a participant in the Transition Assistance Program?		☐ Yes ☐ No
11. Are you the spouse of a veteran died while on active duty in the Armed Forces? 12. Are you the spouse of a veteran who is 100% disabled from a service connected disability?		☐ Yes ☐ No ☐ Yes ☐ No
13. Are you the spouse of a veteran who lied from a service connected disability?		☐ Yes ☐ No
14. Are you the spouse of a military service member of the armed forces who is receiving transition	nal services	☐ Yes ☐ No
EQUAL EMPLOYMENT OPPORTUNITY		
The following voluntary information is requested for the Illinois Department of Employment	Security to evaluate	e its pool of job
seekers and to prepare reports. This information will be confidential and will NOT be used to	make a decision ab	out your employment
Mark the ONE group that best describes your race/ethnicity.	Gender	
White not of Hispanic Origin	Female	
African American not of Hispanic Origin	Male	
Native American		
Hispanic/Latino (A person of Mexican, Puerto Rican, Cuban, Central		
or South America, or other Spanish Culture or origin, regardless of race.)		
Asian or Pacific Islander		
Disabled – A person with a disability is an individual who: (1) has a physical or mental implife activities, such as walking, speaking, breathing, performing manual tasks, seeing, hearin (2) has a record or history of such impairment or medical condition; (3) is regarded as havin	g, learning, caring fo	or oneself or working;

EDUCATION				
Education Status:	Highest school grade completed:			
☐ Attending High School	□ No Education	Some College/Tech/Vocational		
☐ Attending Alternative School	☐ Grade 11	☐ Tech/Vocational Certification		
Attending Post Secondary(Beyond High School)	☐Grade 10	Associates Degree		
☐ High School Drop Out/ Not in School	☐Grade 11	Bachelors Degree		
☐ High School Graduate or GED/Not in School	☐ High School Diploma	☐ Graduate Degree		
	☐GED	☐Doctoral Degree		
List three occupations of interest:				
EMPLOYMENT STATUS				
Employed ☐ Employed but with notice of separation or military separation ☐ Not Employed Select the status that best describes you: ☐ Live in another state but looking for work ☐ Live in Illinois but looking for work in an ☐ Live in Illinois and looking for work in Ill	the prior 26 weeks Less than 1 week Write nu More than 26 week in Illinois Live in Illinother state Live in ano	nois and looking for work in Illinois and other states ther state and looking for working in another state		
MIGRANT WORKER				
Certain types of seasonal agricultural work may qualify workers for additional services. Seasonal means temporary jobs which had a need of less than one year in duration, excluding job termination.				
such as cotton, potato, alfalfa, hay, and beets, vor fruits and nuts such as grapes, berries, pecar flowers, green house and bedding plants may q feedlots, and poultry hatcheries may qualify, as	egetable crops such as: tomato /walnuts, citrus, apples, pears, ualify. Livestock farming such s well as crop harvesting such as pellet milling, grain fumiga	grain crops such as: wheat, corn, soybeans, field, crops beans, broccoli, cucumber, peas, lettuce, and cabbage, peaches, and melons. Working in a nursery with bulbs, has dairy, cattle, sheep, turkeys and chickens, hogs, as: plowing, fertilizer application, aerial spraying, crop tion, or grinding may qualify as well. Grass mowing, tree		
	Work in any food processing	would not include working in places like Frito-Lay, fruit plant must have been both seasonal AND migrant (work residence on a daily basis		
Do you believe that you are a Seasonal Farmwe	orker/Migrant after reading the	e definitions?		
By signing this form, I certify that the above in only to assist me in finding employment	nformation is true to the best	of my knowledge, and that this information will be used		
Signature		Date		